

354451

Law Firm Ref:

**IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF ILLINOIS**

L.S., on behalf of himself and all others similarly situated, by his next friend
JASON MAURER

Plaintiff(s)

vs.

**FRANKLIN COUNTY, CHIEF JUDGE MELISSA MORGAN of the Second
Judicial Circuit Court, DARLA FITZJERRELLS, Director of Court Services
of the Second Judicial Circuit Court, and LAVONDA PORTER, Acting
Superintendent of the Franklin County Juvenile Detention Center,**

Defendant(s)

Case No.: 3:23-cv-02303
AFFIDAVIT OF SPECIAL PROCESS SERVER



I, Jon Graskewicz, being first duly sworn on oath, deposes and states the following:

I am over the of 18 and not a party to this action. I am an agent of It's Your Serve, Inc., Illinois Department of Financial and Professional Regulation number 117.000885. I am licensed or registered as a private detective under the Private Detective, Private Alarm, Private Security, Fingerprint Vendor, and Locksmith Act of 2004, or a registered employee of a private detective agency certified under that Act. I attempted service of the within Summons in a Civil Action; Civil Cover Sheet; Class Action Complaint; Entry of Appearance; Motion and Memorandum in Support of Class Certification; Copy of Summons to Darla Fitzjerrells; Copy of Summons to Lavonda Porter; Copy of Summons to Franklin County; Copy of Summons to Melissa Morgan to Franklin County, located at 100 Public Square, Benton, IL 62812 resulting in the following:

- ☐ **PERSONAL SERVICE:** By leaving a copy of the process with Franklin County personally on the ___ day of ___, 20___ at ___ M.
- ☒ **AUTHORIZED SERVICE:** By leaving a copy of the process with:
Name: Abby Dinn, Title: Franklin City States Atty, an individual of the company willing and able to accept on behalf of the entity/respondent/witness on the 7th day of July, 2023 at 945 A.M.
- ☐ **SUBSTITUTE SERVICE:** By leaving a copy of the process at the above address which is Franklin County's usual place of abode with:
Name: ___, Relationship: ___, a person of his/her family, or other person residing there, over the age of 13 years who was informed of the contents of the listed documents on the ___ day of ___, 20___ at ___ M.
After substitute service, I mailed a copy of the listed documents via regular mail to the subject on the ___ day of ___, 20___.
- ☐ **NON-SERVICE:** for the following reasons with the **DATE and TIME** of each attempt listed along with a description of the attempt (attach an additional sheet if needed):

/ / @ :
/ / @ :
/ / @ :

A description of person with whom the documents were left is as follows:

Sex: F Race: W Approx. Age: 45 Height: 5'6 Weight: 160 Hair: Blk

Noticeable features/Notes: Franklin City States Attorney

The undersigned verifies that the statements set forth in this Affidavit of Service are true and correct.

Signed and sworn before me on
this 7th day of July, 2023

Quinn J. Lindsey
Notary Public

Jon Graskewicz
(Server Signature)
Jon Graskewicz
(Print Name)



SAAFF-054151